

Empowering Quality of Web-based Nutrition and Health Education Through Knowledge Upgrading for “Gizigo” in Yogyakarta

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Abstract

Gizigo actively provides nutrition education on various scientific articles, webinars, and posters through social media such as Instagram. Website-based education has been widely applied in Indonesia to spread nutrition information. The purpose of this community service program is to provide training and assistance for Gizigo to improve the quality of education so that they can develop more productive, innovative, and adaptive education methods. The core activity is to increase the knowledge and skills to support improving the quality and productivity of partners by giving training about Nutritional Education Content and Financial And Tax Management for startups. The topic and case study provided were interesting and applicable in the education field. The result of this activity is health education content material and pre-post test scores. The result of this activity showed an increase in knowledge and number of nutritional education content on the website. It is important to capture and report on the cost and cost-effectiveness of internet-based health education. This information will be critical for the health care provider and public health actives to allocate scarce health care and cost.

Keywords: Nutritional education, startup, website

INTRODUCTION

The development of technology has brought many impacts on society. In Indonesia, startups offer wider health access to people. People are able to get health information directly from their laptops or smartphone (Kurniawan, Alhakim, Safero, Valeria, & Angelina, 2021; Wanto, Suhendro, & Windarto, 2018). Gizigo is a startup platform in the field of nutrition and health education that was founded in 2018. This startup was built by a husband and wife couple, Mufid Salim and Fasty Arum Utami who live in Yogyakarta. Gizigo is a website-based online platform that aims to provide nutritional education about maternal and child nutrition to families in Indonesia. The website consists of some information in the form of digital data such as video, text and audio. This information can be accessed through the internet network. Internet-based media have great potential to improve the quality of nutrition education for the public (Lathifah, 2017).

The idea of establishing 'gizigo' was the beginning of the anxiety from young families in their environment about how to provide nutritional intake during the transition period, such as nutrition for pregnant women, nutrition for breastfeeding mothers, and complementary feeding for babies above 6 months. In addition, there is a lot of information that is not following scientific evidence and is discussed by experts to make the right bridge to improve better quality of nutrition education. Gizigo actively provides nutrition education on various scientific articles, webinars, and posters through social media such as Instagram (Salim, Utami, & Bramantyo, 2021).

Nutrition education is a method and effort to increase knowledge- related to nutrition and eating behavior to optimize nutritional status. Website-based education has been widely applied in Indonesia to spread nutrition information. Currently, the internet user is growing rapidly, and we can access any information easily (Perdana, Madanijah, & Ekayanti, 2017). In 2017, internet users in Indonesia reached the highest number compared to the previous year, which was 143,26 million users (Salim, Dwi Sabna Rosdian, & Farady Marta, 2022; Satriania & Alamsyah,

2020). Therefore, gizigo tries to optimize positive impact to spread the scientific-based information wider through this media.

The internet provides low-cost access to health messages for people that stimulate their perception. It provides a variety of lifestyle interventions based on individual concerns about diet, exercise, and a common healthy lifestyle. The web-based learning also has an effective role in the development of population-based health education programs (Williams, Lynch, & Glasgow, 2007).

Using of evidence-based practice approach would be more constructive in building nutritional health education. Evidence-based public health has great attention to improving the decision of lifestyle (El- Refaay, Ahmed, & Salem, 2017). Six key components influence the decision-making in public health. The first and second keys are making a decision based on the best available scientific evidence and using information or data systematically. The third and fourth keys are applying the program-planning framework and engaging the community in decision-making. The fifth key is conducting evaluation, and the last key is disseminating what is learned. Therefore, it was important to provide valid information about the nutritional issue (Brownson, Fielding, & Maylahn, 2013).

The purpose of this community service program is to provide training and assistance for Gizigo to improve the quality of education so that they can develop more productive, innovative, and adaptive education methods. Partner optimization was expected to improve the quality of nutrition education for the wider community.

METHOD

The training and mentoring activity for Gizigo were attended by the partner team (6 people) and our community service team (3 people) via Zoom Meeting Cloud. The core activity is to increase the knowledge and skills to support improving the quality and productivity of partners.

The first topic was given about Nutritional Education Content. The speaker was Ira Dwijayanti, S.Gz.,M.Sc with 60-minutes online session on May 21st, 2022 at 09.00. The session continued with article writing for 1 month (collaboration with partners) and will be uploaded to the website. The content will be generated according to the brainstorming in the first session. The topic of content is as follow : 1) Non-communicable disease; 2) The legality of the food business and 3) Food safety.

The second topic continues about Financial And Tax Management for Startup. The speaker was Roy Martfiyanto, Ak. MSi, CA with 120-minute online session on June 4th 2022 at 08.00. The topic consists about 1) Cash flow; 2) Business cost; and 3) Tax calculation. At the end of the session, the team distributed the pre and post-test to evaluate the activity.

RESULTS

The topic and case study provided were interesting and applicable. The result of this community service activity is health education content material and pre-post test scores. The education materials uploaded to the partner's website www.gizigo.id. The following are the content article :

1. Hypertention (Link : <https://gizigo.id/hipertensi/>)
2. Diabetes Mellitus (Link : <https://gizigo.id/diabetes-melitus/>)
3. Legality of Food business (Link : <https://gizigo.id/legalitas-umkm/>)
4. Food safety permit (Link : <https://gizigo.id/ijin-pirt/>)
5. Food safety (Link : <https://gizigo.id/keamanan-pangan-umkm/>)
6. Food processing (Link : <https://gizigo.id/pengolahan-pangan/>)

The additional result is pre-and post-test during the second topic attended by eight people. The pre and post-test results below showed that 5 participants (62,5%) had increase knowledge as evidenced by an increase in post-test scores. One participant (12,5%) showed a decrease in pre and post-test scores. In addition, 2 participants (25%) show the same score before and after training.

DISCUSSION

Nowadays, the internet has become of the dominant ways to get health information among the sources of health information. A wide range of health information with varying qualities has thus become accessible to the public. Most people believe that the health information available on the internet is valid and reliable (Hamzehei, Ansari, Rahmatizadeh, & Valizadeh-Haghi, 2018). People access health information through three primary ways: searching for health information, participating in support groups, and consulting with health professionals. However, this issue reveals the need for having a critical view of health information available online that is related to people's life (Furutani, Kobayashi, & Ura, 2009).

Our partners use the 'www' to provide their website visitors with nutrition education, health information, or other health promotion materials. The website is not only for health education professionals but also for the general public to use the website as a self-help tool. Although the website may help distribute the content of educational materials in a relatively inexpensive way, it is certainly not without cost. The website should be maintained and updated, and this requires time and specific effort (Brug, Oenema, Kroeze, & Raat, 2005).

Ideally, the cost-value can calculate by multiplying the time estimates by the median hourly wage of the population similar to the employee. This wage represents the opportunity cost of the time spent in front of the screen. Fixed-cost and variable-cost can calculate separately. Fixed-cost can add to the cost associated with server maintenance and data storage. Variable-cost such as labor costs should add to support the educational content or promote interactive feedback from users (Tate, Finkelstein, Khavjou, & Gustafson, 2009).

CONCLUSIONS AND RECOMMENDATIONS

The initial education of importance between educational content and cost-effectiveness through this community service expected could improve the quality of education and develop more productive, innovative, and adaptive education methods. It is important to begin to capture and report on the cost and cost-effectiveness of internet-based health education. This information will be critical for the health care provider and public health actives to allocate scarce health care and cost.

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APPENDIX

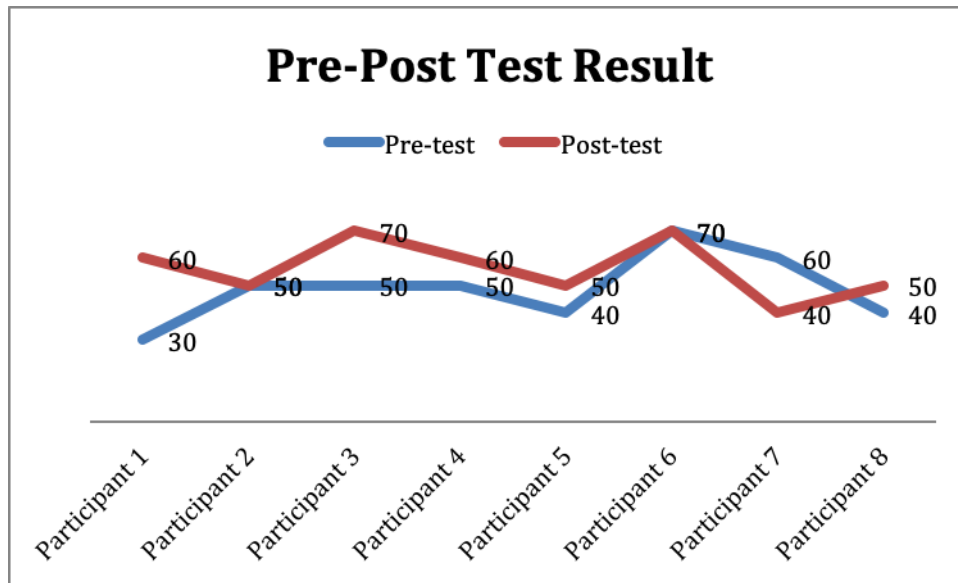


Figure 1. Pre and post result

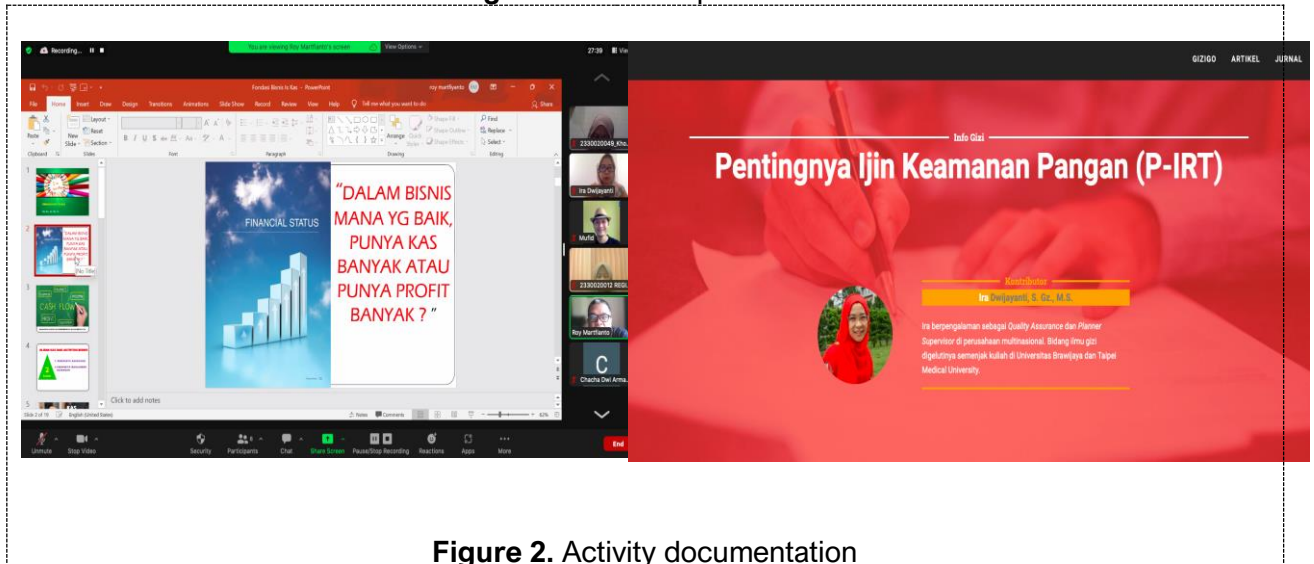


Figure 2. Activity documentation